MAS KiwiSaver Scheme

First Home Withdrawal Application Form



Please send completed form and supporting documents by post to: Medical Assurance Society PO Box 957 Wellington 6140

For assistance: Phone 0800 800 627 Email info@mas.co.nz

(i) Important information

You must have been a member of KiwiSaver and/or a complying superannuation scheme for at least three years to apply for this withdrawal.

You must submit your application, along with all required supporting documents, at least 10 business days before your payment date.

To avoid delays, please take the time to complete the application form in full and send us all the required documents. Your solicitor will be able to help you with this. It's important to note that we can't process withdrawals after your payment date.

By completing this application form, you consent to and authorise the release of, at any time, to the Manager, Medical Funds Management Limited (MFM), MAS (and its authorised agents), all personal information held by any person or organisation that MAS considers appropriate for the purpose of checking information provided by you in support of your application.

For more information about withdrawing funds from your KiwiSaver account for a first home, please read the MAS KiwiSaver Scheme Product Disclosure Statement available on our website at <u>mas.co.nz/kiwisaver</u>

UK pension transfers

If you have transferred money into the MAS KiwiSaver Scheme from a UK pension scheme after 5 April 2006 please contact us as we will require more information before we can process your application.

1. Your information

| Full name | Title | First names (s) | | Surname |
|-----------------------------|----------------------------|------------------------|----------------------|------------------------------|
| Member number | | | Date of birth | dd-mm-yyyy |
| Postal Address | | | | |
| | | | City | Postcode |
| Phone number | Home | | Work | Mobile |
| Email | | | | |
| Prescribed investor | r rate (PIR) | 10.5% | 17.5% | 28% |
| Please refer to ird. | govt.nz/pir for mor | e information on how | to determine your F | PIR. |
| If you'd like us to up | odate your contact | details after you've n | noved in, please pro | vide your new details below: |
| Move in date | | | | |
| New home address | 5 | | | |
| | | | | |
| Postcode | | | | |
| New postal address | S | | | |
| (if different from ab | oove) | | | |
| Postcode | | | New phone numbe | r |

Privacy Statement

We collect, store, use, and disclose your personal information in accordance with our Privacy Statement which is available on our website at <u>mas.co.nz/privacy-statement</u>. You can contact us in relation to your privacy by emailing privacyofficer@mas.co.nz or calling us on 0800 800 627.

2. Eligibility for government contributions

To be eligible to withdraw all of the government contributions you've received during your KiwiSaver membership, you must have lived in New Zealand over that time. If you've lived overseas any time during your KiwiSaver membership and did not have permanent residence in New Zealand, Inland Revenue may need to claim back some of the government contributions you received. Please complete the following questions so we can assess your eligibility.

Since joining KiwiSaver, have you lived overseas and not had a permanent residence in New Zealand?

No (continue to section 3).

| Yes. | Please | provide | details | below. |
|------|--------|---------|---------|--------|
| | | | | |

| Country of residence | From | dd-mm-yyyy | То | dd-mm-yyyy |
|----------------------|------|------------|----|------------|
| Country of residence | From | dd-mm-yyyy | То | dd-mm-yyyy |
| Country of residence | From | dd-mm-yyyy | То | dd-mm-yyyy |

As an exception to this rule, please note that if you were working overseas as an employee of the New Zealand Government or as a volunteer for certain charitable organisations, you're eligible for government contributions. If this applies, please provide evidence with your application, such as a letter on your employer's letterhead confirming the period you were employed.

3. Further eligibility criteria

Are you a previous home owner in the same financial position as a first home buyer?

Yes. You need to provide an eligibility letter from Kāinga Ora - Homes and Communities confirming that you qualify for a KiwiSaver first home withdrawal. You can contact Kāinga Ora - Homes and Communities by either visiting **www.Kāingaora.govt.nz** or calling **0800 801 601**

No.

Are you wanting to buy a home on Māori land?

Yes. You will need to provide evidence you have the right to occupy that land.

No (continue to section 4).

4. Withdrawal details

It's important to note that your KiwiSaver first home withdrawal amount may change as a result of market volatility, any PIE tax rebates or deductions, any contributions we receive and if there were any time periods when you weren't eligible to receive government contributions.

How much would you like to withdraw from your KiwiSaver account?

The full balance, less \$1,000 and any amount transferred from an Australian complying superannuation scheme (if applicable).

A partial withdrawal of

deducted proportionally from each fund I'm invested in.

How will you be using your KiwiSaver withdrawal?

As part of the purchase price to be paid on the settlement date.

Settlement date dd-mm-yyyy

As part of the deposit to be paid on the finance date.

Please note that you can only make a first home withdrawal once, so if you make a deposit withdrawal, you cannot make another withdrawal again at settlement.

Finance date

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5. Identification requirements

The Anti-Money Laundering and Countering Financing of Terrorism Act 2009 requires MAS, on behalf of the Manager, to verify the identity of new investors and, periodically, reconfirm information about existing investors.

Please select one of the options below.

Option One: Electronic Identity Verification and Proof of Address

MAS can confirm the identity and/or New Zealand address of many of our investors electronically, with their permission. Please note that we use a third-party system not owned by MAS to conduct identity checks in this way.

I confirm that I give MAS authority to check my identity and/or address electronically using the documentation provided.

I have included a copy of my current NZ Passport (page showing name, date of birth, photo and signature) or NZ Driver Licence (front & back).

Please note, if this method fails to identify you, we will contact you to provide physical documents, as per Option 2 below.

OR

Option Two: Certified copies of identity and address documents

If you have opted not to use Electronic Identity Verification, then you will need to provide certified copies of the following documentation:

Please provide us with either

A certified copy of your current passport (page showing your name, date of birth, photo, and signature).

A certified copy of your New Zealand driver licence showing your name, signature and expiry date along with one of: certified copy of a bank statement issued to you by a registered NZ bank (dated within the last 12 months); valid credit or debit card with name embossed and signature; birth certificate; citizenship certificate; Government agency letter (e.g. Inland Revenue, Electoral Commission, etc.) dated within the last 12 months; SuperGold card with photo, name and signature.

A certified copy of your New Zealand firearms licence.

AND one of the following showing your name and residential address (which can't be more than 12 months old):

A certified copy of a utility bill (power, gas, water, landline phone, SKY or internet service).

A certified copy of a document issued to you by a NZ Government agency (e.g. Inland Revenue, ACC, Ministry of Justice NZQA, or WINZ).

A certified copy of a NZ council rates notice/valuation.

A certified copy of a residential rental agreement.

Who can certify your documents?

A MAS employee can verify your ID and proof of address. Alternatively, the following people can certify photocopies of original documents:

- Registered medical doctor
- Notary Public
- Justice of the Peace
- Member of the Police
- New Zealand lawyer
- New Zealand Chartered Accountant
- A person who has legal authority to take statutory declarations (or equivalent) in New Zealand.

The certifier must:

- See the original document and make a statement to the effect that the documents provided are true and correct copies and confirm the identity of the named individual;
- State their full name and their capacity to act as a certifier; and
- Date the certification (no more than three months prior to the date of the application).

The certifier cannot be related to you or a person living at the same address, or a party of the application.

When certification occurs overseas, copies of the required documentation must be certified by a person authorised by law to take statutory declarations.

Please note carefully the requirements above. If we need to ask for further information, this will delay the processing of your application.

6. Statutory declaration

| L | Your full name |
|-----|---------------------|
| of | Residential address |
| and | Occupation |

do solemnly and sincerely declare that:

- I have never held an estate in land before, whether alone or jointly with another person, OR I've held an estate in land before, but I qualify for a first home withdrawal as a previous property owner or because the estate was an interest in Māori land.
- I have never made a first home withdrawal from a KiwiSaver scheme before.
- I have been a member of a KiwiSaver scheme and/or a complying superannuation fund for a combined total of at least three years, OR Inland Revenue received a contribution to a KiwiSaver scheme for me at least three years ago.
- I understand \$1,000 and any amount transferred from an Australian complying superannuation scheme can't be withdrawn for a first home withdrawal.
- The property I'm purchasing is intended to be my principal place of residence and is not intended to be a rental or investment property.
- The property I'm purchasing is in New Zealand.
- I understand that my application for a first home withdrawal is subject to the Manager receiving a completed application form and all supporting documents listed in the checklist at least 10 business days before my finance or settlement date.
- I understand my withdrawal must be paid to my New Zealand solicitor's trust account before my payment is due.
- I understand that if I have not had a principal place of residence in New Zealand for any period/s during my KiwiSaver membership, I won't be entitled to withdraw any government contributions received during that same period. Any government contributions claimed on my behalf during any such period will be returned to the Commissioner of Inland Revenue.
- I have read the privacy information in this withdrawal form.
- The information I've provided on this application form is true and correct to the best of my knowledge.

And I make this solemn declaration conscientiously believing the same to be true and by virtue of the Oaths and Declarations Act 1957.

Signature

Declared at

Witnessed by

Occupation

Postal Address

Please note: MAS staff or doctors can't take statutory declarations. The declaration may only be witnessed by a Justice of the Peace, solicitor or other person authorised to take a statutory declaration as set out in the Oaths and Declarations Act 1957.

Signature

Date dd-mm-y

7. Checklist

You need to send us all of the documents in the checklist below.

Completed application form including;

Original statutory declaration (we cannot accept emailed copies), to be witnessed by a person who is authorised to take statutory declarations (refer to section 6).

Documents as necessary according to the identification option selected in Section 5.

A bank deposit slip for your solicitor's or conveyancing practitioner's trust account.

A copy of the sale and purchase agreement for the property you're buying, showing you as the purchaser.

And either:

A letter of undertaking – unconditional agreement, to be completed by your solicitor or conveyancing practitioner if you're using your KiwiSaver savings to pay part of the purchase price at settlement, or

A letter of undertaking – conditional agreement, to be completed by your solicitor or conveyancing practitioner if you're using your KiwiSaver savings as a deposit.

If applicable, you must also supply the following documents:

If you've previously owned a home and are deemed to be in the same financial position as a first home buyer: an eligibility confirmation letter from Kāinga Ora confirms that you qualify for a KiwiSaver first home withdrawal.

If you're buying a home on Māori land: evidence of your right to occupy Māori land.

If you were eligible to receive government contributions (previously known as member tax credits) while working overseas: evidence you were working overseas for the New Zealand Government or a charitable organisation while receiving government contributions.

For assistance: Phone 0800 800 627 Email info@mas.co.nz



| MAS Member number | | |
|--|---|-----------------|
| We refer to the Member's application for a first home relating to the purchase of: | withdrawal from the Scheme (the Application), | |
| Address of property | | |
| | | (the Property). |
| The finance date for the purchase of the Property is | dd-mm-yyyy | |
| Documents | | |
| We enclose copies of the following: | | |
| A completed first home withdrawal application incluto take statutory declarations. | uding statutory declaration witnessed by any per | rson authorised |
| 2. Documents as necessary according to the identific | ation option selected in Section 5 of the Applica | tion. |
| 3. The agreement for Sale and Purchase of the Proper | rty with: | |
| Vendor's name | | (the Vendor). |

4. Our pre-printed bank deposit slip for our trust account.

- 5. Where the Member is purchasing an interest in a dwellinghouse on Māori land, evidence of the Member's right to occupy the Property or land.
- 6. Where the Member has previously owned a home, an eligibility confirmation letter from Kainga Ora.
- 7. Where the Member has received Government contributions while working overseas, evidence that they were working for the New Zealand Government or a charitable organisation while receiving Government contributions.

Undertaking

We confirm that we act for the Member, who is to purchase the property under the Agreement, and we undertake to you that:

- 1. As at the date of this letter, any funds received by us pursuant to this Application (the Funds) will be paid to a stakeholder or Vendor who is obliged to hold the Funds while the Agreement is conditional, and
- 2. If settlement under the Agreement is not completed by the due date in the Agreement or any extended date:
 - a. except where the non-completion is due to the default of the purchaser(s), the stakeholder or vendor is obliged to repay the funds to us, and
 - b. we will, as soon as possible, repay to you the Funds received from the stakeholder or vendor on account of the Member with no deductions or disbursements, and
- 3. Where we have sent the Application to you by email, the copy of the Application attached to that email is a true and correct copy of the original document which I have sighted.

I confirm that I hold a current Practising Certificate issued pursuant to the Lawyers and Conveyancers Act 2006.

Solicitor name or conveyancing practitioner

Company name

Phone number

Fmail

Signature

Date dd-mm-yyy

(the Vendor),

(the Member),

(the Agreement)

Member's name

Letter Of Undertaking Conditional Agreement To be completed by your solicitor or conveyancing practitioner.

To Medical Funds Management Limited (MFM) as Manager of the MAS KiwiSaver Scheme (the Scheme)

П

Date

| To be completed by your | solicitor or conveyancing prac | ctitioner. | | |
|---|--|-------------------|-------------------------------|------------------|
| To Medical Funds Manage | ement Limited (MFM) as Manage | er of the MAS Kiw | viSaver Scheme | |
| Member's name | | | | (the Member), |
| MAS Member number | | | | |
| We refer to the member's relating to the purchase of | application for a first home wit if: | hdrawal from the | Scheme (the Application), | |
| Address of property | | | | |
| | | | | (the Property). |
| The settlement date for th | ne purchase of the Property is | dd-mm-yyyy | |] |
| Documents | | | | |
| We enclose copies of the | following: | | | |
| 1. A completed first home to take statutory declar | withdrawal Application includi ations. | ng statutory decl | laration witnessed by any pe | erson authorised |
| 2. Documents as necessa | ry according to the identification | on option selecte | d in Section 5 of the Applica | ation. |
| 3. The agreement for Sale | e and Purchase of the Property | with: | | |
| Vendor's name | | | | (the Vendor), |
| Date | dd-mm-yyyy | | (the Agreement), | |
| 4. Our pre-printed bank d | leposit slip for our trust accoun | t. | | |
| 5. Where the Member is p occupy the Property or | ourchasing an interest in a dwell land. | inghouse on Māc | ori land, evidence of the Mer | nber's right to |

Letter Of Undertaking Unconditional Agreement

6. Where the Member has previously owned a home, an eligibility confirmation letter from Kāinga Ora.

7. Where the Member has received Government contributions while working overseas, evidence that they were working for the New Zealand Government or a charitable organisation while receiving Government contributions.

Undertaking

We confirm that we act for the Member, who is to purchase the Property under the Agreement, and we undertake to you that:

- 1. As at the date of this letter, any funds received by us pursuant to this Application (the Funds) will be paid to a vendor who is obliged to hold the funds while the agreement is conditional, and
- 2. Any funds received by us in relation to this Application (the funds) will be paid to, or as instructed by, the Vendor as part of the purchase price, or
- 3. If settlement under the Agreement is not completed by the due date in the Agreement or any agreed extended date, the Funds will be repaid to you as soon as practicable on account of the Member, with no deductions or disbursements, and
- 4. Where we have sent the Application to you by email, the copy of the Application attached to that email is a true and correct copy of the original document which I have sighted.

I confirm that I hold a current Practising Certificate issued pursuant to the Lawyers and Conveyancers Act 2006.

Solicitor name or conveyancing practitioner

Company name

Phone number

Email

Signature

Date dd-mm-yyy